

To apply for use of the City Armory facility for your event or activity, please complete this application.

Submit this application form, in both a hard copy and on disk or email to, Tammy Forest, Special Event

Coordinator. This Application must be received a minimum of forty five (45) days prior to your event or activity to be considered for approval.

Event Name									
'		Event Start Date			Event	End Date			
		•			_	'			
Annual Event		1st Time Event			Longevity	of Event		Alcohol Served	
					_				
Event Category	Community		Concert/Da		_	ade Show		Fund Raisi	
(check all that apply)	Private Party/R		Private Di	nner	Athle	etic Event		Sale/Commerc	ial Event
	Otner	(specify)							
Event Organizer								Corporate ID#	
Street Address								Non-Profit Corp.	
City			S	State	Zip				
Primary Contact					Email	Address			
Phone		Fa	x Phone				Cellular	/ Page #	
A 1 11/2 1 = .									
Additional Event	Contact								
Filliary	Phone				Cellular /	Pane #'s			
	1 Hone				7	. ago " o			
Additional Event	Partner								
Primary	Contact								
	Phone				Cellular /	Page #'s			
Event S	ponsors								
Description	of Event								
Event Site De	atad	Market (ins	ido only)			Armory			
Event Site Re (indicate all th	-		rket (both ins	ide & outside	\	Ailliory	Fount	ain Area	
(illulcate all til	iat apply)	IVIC	inter (both inc	ido di odiolog	/	l	Tourit		
	Admission / E	ntry Fee In A	Advance:			Day of:			
Ov	Overall Attendance Estimate Largest One-time Attendance Estimate								

	Event Venue Set-up & Break down	n information	
Event Venue Set-up Date(s)	Set-up Start Time	Set-up Finish Time	
Venue Break-down Date(s)	Break-down Start Time	Break-down Finish Time	
Additional Market/Armory required for Set-up or			
Requested Street closed for the event			
Proposed Date(s) & T	Times of Closures		
Event Start Date	01/00/00 Time Open to Public	Time Closed to Public	
_	Music / Sound Start Time (inc. sound checks)	Music / Sound End Time	
	Alcohol Service Start Time	Alcohol Service End Time	
0.15 .0.5		T 0 1 D 1	
2nd Event Date	Time Open to Public	Time Closed to Public	
	Music / Sound Start Time (inc. sound checks) Alcohol Service Start Time	Music / Sound End Time Alcohol Service End Time	
	Alcohol Service Start Time	Alcohol Service Elia Tillie	
3rd Event Date	Time Open to Public	Time Closed to Public	
	Music / Sound Start Time (inc. sound checks)	Music / Sound End Time	
	Alcohol Service Start Time	Alcohol Service End Time	
_			
4th Event Date	Time Open to Public	Time Closed to Public	
	Music / Sound Start Time (inc. sound checks)	Music / Sound End Time	
	Alcohol Service Start Time	Alcohol Service End Time	
5th Event Date	Time Open to Dublic	Time Closed to Public	
	Time Open to Public Music / Sound Start Time (inc. sound checks)	Music / Sound End Time	
	Alcohol Service Start Time	Alcohol Service End Time	
	August Colvice Start Time	Alcohol Gervice Ella Tillie	
(Include only informati	Event Merchants & Vendors In on about event Merchants & Vendors that are not but		
Note: All <u>permanent</u> M	arket vendors retain the right to remain open for bus	iness during all events/activities at the Market.	
Food Served/Sold at Event	# of Vendors # of Non-Profit \		
	# of Food Vendors Needing El		
Cooking Method - C	Charcoal Gas/Propane	Electric Other	
(check all that apply) Merchandise Sold at Event	# of Vendors # of Non-Profit \	/endors # of For-Profit Vendors	
Merchandise oold at Event	# of Merch. Vendors Needing El		
	, s. morsh. Volidor Hosding En		
Other Items / Services Sold	Describe Items/Services		
	# of Vendors # of Non-Profit \	/endors # of For-Profit Vendors	
	# of Vendors Needing El	ectricity # of Vendors Needing Water	

	Will <u>you</u> be	(Check	& complete all that apply)			
Dumpsters	Quantity	S	tage or other structures	Quantity	Describe	
Portable Toilets	Quantity	Fireworks, fires or pyrotechnics		Describe		
ecycling Containers	Quantity	Name	of Fireworks Contractor		Phone #	
Banners or signs	Quantity	Boot	hs, exhibits or displays	Quantity	Describe	
Live Entertainment	Describe		Tents or canopies	Quantity	Size - Sq. Ft	t.
	Becombe		Vehicles / trailers	Quantity	Describe	
Amplified Music or	Describe		Animals	Quantity	Describe	
Sound			Tables or chairs	Describe		
Shuttle Services	Describe		VIP Area	Describe		
Site Decorations	Describe		Amusement rides	Quantity	Describe	
Catered Food	Describe		or inflatables			
Special Lighting	Describe		Web site or hot-line p	hone U	RL or Phone #	
	uesting that the		rg provide any of the fo and complete all that apply)	llowing items o	r elements for your o	event?
Are you requ	uesting that the			llowing items or	r elements for your e	event?
Elec	strical Service	(Check a		llowing items o	r elements for your o	event?
Elec V	trical Service	(Check a		llowing items or	r elements for your e	event?
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Elec V Firs Vol	vater Service Vater Service st Aid Service Illeyball Goals	Check at Describe Describe Describe Describe		llowing items or	r elements for your o	event?
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Liability Insurance Information

A Certificate of Insurance for this Event must be presented to the City of Lynchburg (c/o Special Event Coordinator) no later than 15 calendar days prior to the Start Date of the Event. If the information requested below is not available when this Application is submitted, it can be added later, but not later than the 15 day deadline previously noted.

Insurance Agency		Agent's Name			
Business Phone	Policy #		Policy \$ Limits		
Address		City		State	Zip
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Indemnity Agreement:

Witness the following signature (Event Organizer signature):

The Lessee will be responsible for any and all damages its guests and invitees cause to the Community Market, any City property stored therein, the City Armory, or parking lot and the Lessee shall indemnify and save harmless and provide a defense for the City of Lynchburg, its agents, employees and officials, from any and all liability, damages, expenses, causes of action, suits, claims or judgments which may accrue against, be charged to, be recovered or sought to be recovered from the City, its agents, employees or officials, by reason of or on account of damage to the property of the City of Lynchburg and the property of, injury to, or death of any person arising from the Lessee's use and occupancy of the demised premises. To effect the same, the Lessee agrees to maintain and pay for public liability and property damage insurance in at least the amount of One Million Dollars (\$1,000,000) for general public liability for injuries to or death of persons, or damages to property in or about the demised premises.

Such Insurance policy shall name the City of Lynchburg, it's agents, employees and officials as additional insured parties and shall include or be endorsed to include the contractual liability assumed by the Lessee under the indemnity agreement contained in this paragraph. It is expressly agreed and understood that the Lessee's liability to the City, its agents, employees and officials hereunder shall not be limited to the amount set forth in said insurance policy.

	,
	(Signature)
Witnessed by:	
	(Signature)
have read, understand, and agree to abide by the all regulatio	lication is true and correct to the best of my knowledge and belief, that I ons, provisions and rules governing the Lynchburg City Armory as set forth
by the City of Lynchburg. Applicant	
Title (Print or type)	
Signature of Applicant (Event Organizer)	D : (A P P
	Date of Application

A signed hard copy of the Indemnity Agreement and Affidavit of Applicant portions of this Facility Use Application must be provided to the City before an Application will be considered fully executed. Submit a hard copy and an electronic version (either email or disk) of this Facility Use Application to Tammy Forest, Special Events Coordinator.

Lynchburg Parks & Recreation Department 301 Grove Street Lynchburg, VA 24501

Phone: 434 455-5871 Fax: 434 528-2794 Email: tammy.forest@lynchburgva.gov